



BASIC INFORMATION

DESCRIPTION

Malignant tumor of the penis including the glans (tip), corona (rounded border of the glans) or prepuce (fore-skin covering the glans). Penis cancer is uncommon. It most often affects men over age 50.

FREQUENT SIGNS AND SYMPTOMS

Early stages:

- A small circular lesion (resembles a pimple) or persistent, painless sore on the penis. The lesion is easily visible in a circumcised male, but it may go unnoticed in an uncircumcised male.

Later stages:

- Pain, bleeding or discharge from the tumor.
- Discomfort with urination.
- Enlarged lymph nodes in the groin.

CAUSES

Unknown, but penile cancer is rare in men circumcised at birth or shortly thereafter. This may explain why it is rare among Jews, Muslims, and members of other cultures where early circumcision is customary.

RISK INCREASES WITH

- Previous leukoplakia of the penis, balanitis or epithelial horn on the penis.
- Personal uncleanliness, especially of the genitals in uncircumcised males.

PREVENTIVE MEASURES

- Consider having male children circumcised soon after birth.
- Examine the penis and testicles monthly to detect possible cancers early, when treatment is most successful. Seek medical treatment for any sign of infection or sore on the penis.

EXPECTED OUTCOMES

The 5-year survival rate is about 50%, even with treatment. Recurrence remains a possibility after treatment.

POSSIBLE COMPLICATIONS

Penis cancer spreads quickly to nearby lymph nodes, but slowly to distant sites or organs. Many men delay treatment due to denial or fear of disfigurement and loss of sexual function. This increases the likelihood the cancer will spread and cause death.



TREATMENT

GENERAL MEASURES

- Diagnostic tests may include laboratory studies, such as culture of the tumor discharge, urinalysis, and blood tests and biopsy of any suspicious penile lesion. In addition, CT scans and a lymph node biopsy may be necessary to see if the cancer has spread.
- Treatment will depend on staging of the cancer.
- Hospitalization and surgery to remove the tumor. Local tumors of the foreskin may require circumcision only. Invasive tumors require total removal of the penis and regional lymph nodes.
- Radiation therapy may be recommended if the cancer has not spread.
- Psychotherapy or counseling after surgery to learn to cope with an altered self-image.
- A bladder catheter will be necessary for a prolonged period (sometimes permanently) after surgery and irradiation treatment.
- Additional information available from the American Cancer Society, local branch listed in the telephone directory, or call (800) ACS-2345. Another source is the Cancer Information Clearinghouse at (800) 4-CANCER.

MEDICATIONS

- Pain relievers, if necessary.
- Anticancer drugs for widespread cancer. However, the effectiveness of presently available drugs is only temporary.

ACTIVITY

Resume your normal activities as soon as possible after treatment. Sexual relations are possible if enough penile tissue remains following surgery.

DIET

No special diet.



NOTIFY OUR OFFICE IF

- You or a family member has any lump or sore on the penis.
- Excessive bleeding occurs at the surgical site.
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.